

Rec'd PTO 03 JUN 2005

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL

101537507

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL IND. | 116 | | | | | |
| TOTAL DEP. | 33 | | | | | |
| TOTAL CLAIMS | 149 | | | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL IND. | 7 | | | | | |
| TOTAL DEP. | 34 | | | | | |
| TOTAL CLAIMS | 41 | | | | | |

BEST AVAILABLE COPY